
INSTRUCTIONS AND FORMS

SECONDARY SCHOOLS

COMPLETING THE WSR PLAN

Definition:

Secondary means middle and high school grades 6 through 12, except in districts having an elementary structure incorporating grades 6 through 8, in which case it means grades 9 through 12.

Below are instructions for completing the WSR Implementation Plan and School-Based Budget for *secondary schools*. *The same instructions apply to elementary schools incorporating grades six, seven, and/or eight that intend to apply for Required Programs in Secondary Schools*. Each form of the plan is preceded by information pertaining to the form and directions for completion. A complete copy of the instructions and forms is located on the NJDOE Web site:

<http://www.state.nj.us/njded/abbotts/guide/>

A feature has been built in to assist you in tracking the date of each draft during the preparation process. In the footer at the bottom of the page for each form, there is a date. This date will automatically change every time the document is accessed, thereby keeping track of updated revisions.

A. WSR IMPLEMENTATION PLAN DEVELOPMENT CONSIDERATIONS

In order to complete the submission, staff responsible (SMT, principal, CSA) for the WSR Implementation Plan will need to do the following:

- Collaborate to develop a plan and budget that align the school's programs with the WSR model that will help students meet the CCCS;
- Be knowledgeable about the programs and services needed by the school community, and the purposes and constraints on the uses of the funds under the illustrative budget;
- Review and/or revise the approved 2000-2001 plan, WSR Grant Funds Application and DEPA plan to ensure its consistency with the objectives and activities to be funded;
- Obtain input from WSR developers, parents, teachers, community members, advisory

councils and others, as required;

- Seek assistance from district specialists (e.g., School-to-Career, Special Education, Bilingual/ESL, etc.) to ensure the comprehensiveness of the WSR plan in meeting the needs of all children;
- Determine those areas in which student performance and behaviors are below state standards and develop objectives and benchmarks to meet state standards consistent with the requirements of the Quality Assurance Annual Report (QAAR). For objectives included in the plans to be approved by the county office, they must be consistent with the QAAR format;
- Meet with school business administrators to verify the accurate completion of the budget;
- Obtain assistance and input from the school's SRI team; and
- Obtain approval from the CSA, school principal and the SMT.

B. SUBMISSION

➤ **NOTE: Schools in cohorts 1, 2 and mid-year 2 are encouraged to submit the WSR Implementation Plan on or before November 1.**

No later than **December 1, 2000**, all cohorts must submit the original and two copies of the WSR Plan and School-based budget (with all attachments) to the appropriate PIRC noted below and six copies of the WSR Plan and School-based budget (with all attachments) to the Office of Program Review and Improvement:

OFFICE	# OF COPIES
Joan Tomlin, Program Manager PIRC-Central 1090 King Georges Post Road Edison, NJ 08837	Original and 2 copies
Eunice Y. Couselo, Acting Program Manager PIRC-North 240 So. Harrison Street East Orange, NJ 07018	Original and 2 copies
Donna Snyder, Program Manager PIRC-South 1492 Tanyard Road Sewell, NJ 08080	Original and 2 copies
Orlando Castro, Director Office of Program Review and Improvement New Jersey Department of Education P. O. Box 500 Trenton, New Jersey 08625-0500	Six copies

C. IMPLEMENTATION PLAN AND BUDGET REVIEW

The NJDOE will review submissions, determine approval or disapproval of requests, notify appropriate agencies, and process approved submissions to ensure the following:

- the selected WSR model is progressing toward full implementation by the third year;
- program components, services and activities described are authorized and consistent with the model selected and the needs of the school community;
- expenditures support the programs described and are consistent with the costs described in the illustrative model;

- services are coordinated;
- instructional strategies enable achievement of high standards in safe learning environments;
- expenditures meet the budgetary constraints and allowable costs;
- the submission is complete, including signatures, and assurances; and
- WSR schools and LEAs are notified of final approvals.

Incomplete submissions or requests for revisions of plans will lead to delay in plan approval. **Once a plan and school-based budget are approved, the school-based budget must be incorporated into the district budget using Fund 15.**

Plans will be reviewed by the department to ensure that schools have followed the code requirements. All plans must:

- have all cover page information and signatures;
- have all program costs consistent with the illustrative budget. Any cost outside the illustrative budget must be reallocated within the school budget, if possible, or excluded from the school budget and submitted as a particularized need;
- be based on a needs assessment. Careful consideration must be given to providing a plan that is based on the documented needs of the school; and
- include RPSS and Particularized Need applications (if applicable).

The department will review all plans during the budget process and will contact the district and school to discuss the status of their plans.

D. WSR IMPLEMENTATION PLAN INSTRUCTIONS FOR COMPLETION OF FORMS

Use the forms provided in this section for each submission component. Duplicate forms as needed. Narrative should be submitted in no smaller than 12-point type.

1. CHECKLIST - FORM A PROVIDED

2. WSR IMPLEMENTATION PLAN TITLE PAGE AND CERTIFICATION – FORM B PROVIDED

Complete the WSR Implementation Plan Title Page and attach it to the front of the WSR Implementation Plan.

The Title Page provides all information necessary to identify the school and verify the amount of funds in the plan and budget.

The principal, CSA, WSR school facilitators, district business administrator and SMT chair must sign the Plan Certification on the Title Page in the appropriate section.

The budget submission must be accompanied by the CSA and board comments (if any) and the responses to each comment from the principal, developed in consultation with the SMT.

3. WSR IMPLEMENTATION DESCRIPTION – FORM C PROVIDED

Complete this form by succinctly answering the questions on the processes used and decisions made in order to complete the 2001-2002 WSR Implementation Plan.

4. WSR IMPLEMENTATION TIMELINE – FORM D PROVIDED

Complete a one-or two-year WSR Implementation Timeline showing all components of the WSR Model and leading to full implementation of the model. The timeline should be developed in consultation with the WSR model developer. If a waiver was granted beyond year three, explain the current status of implementation.

5. PARTICIPANTS IN SUBMISSION DEVELOPMENT FORM – FORM E PROVIDED

Complete the Participants in Submission Development Form and include the name, title and signature of all individuals who participated in the development of the 2001-2002 WSR Implementation Plan and School-Based Budget

6. CLASS-SIZE REDUCTION – FORM F PROVIDED

Complete the class-size reduction plan by answering the questions provided on the form. It will be necessary to describe how the school will reach the required teacher-student ratios as required in code (1:21 for grades K-3, 1:23 for grades 4-8, and 1:24 for grades 9-12).

7. RESEARCH-BASED STRATEGIES FOR HIGH SCHOOLS -- FORM G PROVIDED

8. WAIVER REQUEST – FORM H PROVIDED

Waivers must be submitted on an annual basis.

9. ACTIVITY PLAN – FORM I PROVIDED

The Activity Plan forms are included in this package. A separate Activity Plan form has been provided for each element of WSR (improved student achievement and research-based program have been integrated), one for dropout prevention, reducing class size, increasing graduation and increasing attendance rates. Four RPSS elements correspond to WSR elements; complete only one activity plan form for these four areas (i.e., health and social services, security, educational technology and professional development). Two RPSS components (school-to-career and alternative education) do not correspond to WSR elements and these are found on separate forms.

On each Activity Plan form, state the name of the district, school, WSR model, current date and page number. The revision date will be used if revisions are necessary. Indicate the school's cohort on each form.

Then complete each column:

Goal Statement: Create a goal relating to accomplishment of the WSR area.

Objective: Create an objective relating to accomplishment of the goal. (If you are developing the QAAR or strategic plan, use the same objective and add other objectives as needed.)

➤ **NOTE:** It is possible that the same objective may appear on more than one activity form.

Benchmark: Create a benchmark relating to accomplishment of the objective.

Activity: Describe the tasks and activities in chronological order planned for the accomplishment of each goal and objective.

Timeline: Indicate the month and year the activity will be completed.

Budget

Description: List, in detail, all expenditures necessary to complete the program, service or activity.

Budget Amount: Include the cost of each detailed expenditure.

Workpaper: Indicate the workpaper (A to X) in the 2001-2002 school-based budget which coincides with the expenditures and costs for this activity.

Method of Accountability: Indicate the method(s) of accountability used to track the progress completion of each activity, such as eight-week assessments, monthly reports on attendance, implementation of model components, etc.

10. INVENTORY AND ASSESSMENT – FORM J PROVIDED

For each of the six required RPSS, indicate what currently exists in the school or is being provided by the school in collaboration with a community agency. Determine how well these programs and services are serving the student population based on an assessment of their efficacy and efficiency. The WSR needs assessment should determine, using existing standards (e.g., 90 percent attendance) and related school data, whether the current programs are effective and efficient. If a needs assessment is done properly, a school will be in a better position to identify and justify the need for starting, expanding and/or eliminating existing programs and services and/or using community resources.

11. REVIEW OF COMMUNITY RESOURCES – FORM K PROVIDED

For each of the six required RPSS areas, complete a review of community resources that could be used to address the area(s) of need.

12. SMT RECOMMENDATIONS – FORM L PROVIDED

For each of the six required RPSS areas, each item identified must be evaluated as to its effectiveness and efficiency after the inventory and assessment are complete. The review of community resources should also be used to determine possible options for the delivery of programs and services to meet the needs of the school's community. Provide recommendations for elimination or modification of programs or services judged less than efficacious and efficient, or which overlap with the proposed new program or service or community resource.

- An effective program or service is one that produces the expected and desired result.
- An efficient program or service is one that produces the intended result in a cost-effective way.

The results of the inventory, community resources and SMT recommendations should be integrated into the WSR Implementation Plan.

13. EVALUATION PLAN – FORM M PROVIDED

Describe the methods that will be used to evaluate (1) implementation progress (formative) and (2) outcomes (summative). Evaluation of implementation progress should determine to what degree the activities described in the plan have been undertaken (are they happening?). Evaluation of outcomes should determine effects on student achievement (is it working?). The school should work in collaboration with the model developer to align its evaluation methods with those of the model and with the district's Accountability Plan.

For each objective, describe the methods that will be used to determine how completely the strategies were implemented, if the strategies were successful and if the objective was met. Respond to the following *for each objective*:

- (1) State the objective.
- (2) Describe the methods to be used to measure progress towards the objective (e.g., test scores, survey results, interview results).
- (3) State who will develop and conduct the evaluation, and when the evaluation will occur.
- (4) State how the results will be analyzed (i.e., what are you looking for?).
- (5) State how the results will be distributed (i.e., how will you include the various stakeholders in the process?).

Provide an outline for an interim and final progress report that describes the evaluation results, and lists barriers and recommendations.

TECHNOLOGY PLAN (ASBTP) (2000 – 2002)

- **NOTE:** Cohorts one and two WSR schools that completed and submitted a technology plan, will not have to resubmit this plan but must complete the appropriate Activity Plan form (WSR Implementation 2001-2002 Activity Plan) showing the activities and related costs for 2001-2002. The activities and costs included must agree with the approved two-year plan. If adding a component which was not included in the approved two-year plan, schools must submit an activity form indicating activities of the new component, title of responsible person for implementation, budget allocation, etc.

MID-YEAR TWO SCHOOLS, THIRD COHORT SCHOOLS AND ANY SCHOOLS WITHOUT AN APPROVED TECHNOLOGY PLAN MUST:

Complete the School-based Technology Plan using the forms and checklists provided by the Office of Educational Technology at the end of this section. Directions are included below.

Educational Technology is a required component of the WSR Implementation Plan and the Required Program for Secondary Schools. By completing the Abbott School-based Technology Plan and checklist, each school will have met the technology plan requirement. The Abbott School-based Technology Plan and checklist include all substantive information necessary to determine if there is a concerted effort toward infusing educational technology into the curriculum for school year 2001-2002.

If questions arise as to the completion of this document, please contact your district technology director/coordinator or contact Linda Carmona-Bell, Office of Educational Technology, (609) 292-1414, e-mail: lcarmona@doe.state.nj.us.

Checklist Instructions:

1. Fill in the county name, district name, and school name.
2. Indicate the whole school reform model adopted by your school.
3. Fill in the grade level of the school, the number of students in the school for school year 2000-2001, and the number of teachers in the school for school year 2000-2001.
4. Indicate the school Web site address. If the school does not have a direct Web site address, please indicate the school district's Web site address.

Note that a correlation **must** exist between the Abbott School-based Technology Plan (ASBTP) and the District Technology Plan (DTP.) For every question asked on the checklist, enter the page numbers in the corresponding column where the information may be found in the District Technology Plan (DTP) and in the submitted Abbott School-Based Technology Plan (ASBTP).

VISION

The vision of the school for educational technology over the next year is to be conveyed. Also include the titles of all persons involved with working on the completion of the checklist/technology plan.

GOALS AND OBJECTIVES

The goals and objectives must be linked to the school's vision over the next year. The goals and objectives need not include all of the district's goals and objectives. However, it is expected that there is a correlation of goals and objectives between the two plans.

Since the school has adopted a whole school reform model or alternative program design, show how the goals and objectives already stated reflect incorporating technology into the reform model.

SURVEY

The Office of Educational Technology requested completion of educational technology surveys by each school in the spring of 2000. If a copy of the school survey is not available to be attached, complete the survey online, print it and attach a copy to the checklist/technology plan. The survey may be obtained from the NJDOE Web site: http://www.state.nj.us/njded/techno/survey/results/form_sample.htm. This survey serves as the needs assessment component for this element of WSR.

IMPLEMENTATION STRATEGIES/ACTIVITY NARRATIVE

Describe the efforts of the school to acquire and maintain equipment (e.g., servers, computers, printers, scanners), building wiring and networking items. (It may include telecommunications wiring, networking the school or connecting the school to the district network.)

Describe the professional development schedule or plan for all school employees for school year 2001-2002.

IMPLEMENTATION STRATEGIES/ACTIVITY/BUDGET TABLES

The table is available on the department's Web site under the Abbott School-Based Technology Plan Checklist at:

<http://www.state.nj.us/njded/techno/localtech/index.html>

Download the table and complete each section. Be sure to include the goal and objective to which the strategy and activity are related. Indicate the strategies that will lead to the accomplishment of the objective and the specific activities that occur in the classroom using technology.

The activities when linked to appropriate objectives must include, at a minimum, professional development, examples of infusing technology into the adopted WSR model and the curriculum, acquisition and maintenance of hardware, software and all related technology items such as wiring, network access, telecommunications and facilities.

Indicate the relationship of the Core Curriculum Content Standards (CCCS) to the strategy/activity. The department's numbering system for the CCCS may be used. The CCCS is found on the department's Web site at: www.state.nj.us/education

Indicate title of the person **directly** involved with implementing the strategy/activity.

Provide the funding source and budget detail (e.g., # computers @ per-unit cost = total dollar amount) proposed for 2001-2002 associated with implementing the strategy/activity. The funding source may be referenced by the FUNDING SOURCE KEY provided at the bottom of the table.

Provide the workpaper reference letter indicating on which budget workpaper these costs will be listed.

Indicate the month and year for which the strategy/activity has or will occur.

EVALUATION PLAN

The table is available on the department's Web site under the Abbott School-based Technology Plan Checklist at:

<http://www.state.nj.us/njded/techno/localtech/index.html>

Download the table and complete each section. Be sure to include the goal to which the objective is related.

For each objective noted in the Goals and Objectives section, indicate the tools or criteria that will be used to determine if the objective was successful. Outcome-based results (i.e., student report, curriculum change) may be used as an evaluative measure.

Indicate the title of the person(s) directly involved with conducting and analyzing the evaluation results for each objective.

Indicate the month and year when the evaluation will occur.

SIGNATURES

There is a need to ensure that all involved with the implementation of the school's technology plan are familiar with its contents. Therefore, the completed document is to be reviewed, signed and dated by an SMT representative, the school principal, and the district's technology director/coordinator.

Provide the name of the person **most familiar** with the technology plan in the event that clarifications or revisions are needed. Include the name, title, direct telephone number and e-mail address. Note that e-mail is the preferred method of communication by the Office of Educational Technology to the contact person.

CHECKLIST Form A

A. SUBMISSION CHECKLIST FOR WSR IMPLEMENTATION PLAN

Use this checklist to ensure that the contents of your WSR Implementation Plan submission package are complete. Submission of all plan pages is required on an annual basis. Incomplete submissions may delay approval of your plan. A complete copy of the instructions and forms is located on the NJDOE Web site:

<http://www.state.nj.us/njded/abbotts/guide/>

A feature has been built in to assist you in tracking the date of each draft during the preparation process. In the footer at the bottom of the page for each form, there is a place to enter a date. This date will automatically change every time the document is accessed, thereby keeping track of updated revisions.

FOR SECONDARY SCHOOLS

- ☐ Title Page - Form B
- ☐ Assurances and Certification
- ☐ WSR Implementation Plan Description - Form C
- ☐ WSR Implementation Timeline - Form D
- ☐ Participants in Submission Development - Form E
- ☐ Plan for Class-Size Reduction - Form F
- ☐ Research-Based High School Strategies - Form G
- ☐ *See Waiver below - Form H*
- ☐ 2001-2002 Activity Plan Forms - Forms I
- ☐ Inventory and Assessment- Form J
- ☐ Review of Community Resources - Form K
- ☐ SMT Recommendations (Based on Effectiveness & Efficiency) - Form L
- ☐ Evaluation Plan - Form M
- ☐ Budget Summary
- ☐ Budget Detail
- ☐ Technology Plan (Mid-year 2nd and 3rd cohorts complete entire plan)
- ☐ Class Size Reduction Activity Plan Form
- ☐ Increased Graduation Rate Activity Plan Form
- ☐ Improving Attendance Rate Activity Plan Form
- ☐ Dropout Reduction Strategy Activity Plan Form

TITLE I

Is the school a Title I Schoolwide Program? ☐ Yes ☐ No

WAIVER REQUEST INCLUDED - Form H

Specify

PARTICULARIZED NEEDS REQUEST INCLUDED ☐ particularized need(s) included

Specify

NEW JERSEY DEPARTMENT OF EDUCATION**B. WSR IMPLEMENTATION TITLE PAGE**

WSR MODEL:	CURRENT DATE:	REGION: ____North ____Central ____South
COHORT: ____1 ST ____2 ND ____mid-yr 2 nd ____3 rd		APPROVED TITLE I SCHOOLWIDE: ____Yes ____No
COUNTY:	COUNTY CODE:	
DISTRICT:	DISTRICT CODE:	SCHOOL: SCHOOL CODE:
DISTRICT CONTACT:		SCHOOL PRINCIPAL:
DISTRICT CONTACT PHONE:		PRINCIPAL PHONE:
DISTRICT CONTACT FAX:		PRINCIPAL FAX:
DISTRICT CONTACT EMAIL:		PRINCIPAL E-MAIL:
DISTRICT BUSINESS ADMINISTRATOR NAME:		SCHOOL ADDRESS—CITY, STATE, ZIP
DISTRICT BUSINESS ADMINISTRATOR PHONE/FAX:		GRADE SPAN OF SCHOOL: Grades ____ - ____ Elementary____ Middle ____ High School _____
DISTRICT ADDRESS—CITY, STATE, ZIP		TOTAL SCHOOL-BASED BUDGET FUNDS:
ASSURANCES		
<p>To the best of my knowledge and belief, the information contained in the WSR Implementation Plan and School-Based Budget is true and correct. I further certify that I have reviewed and submitted comments to the School Management Team regarding the WSR Implementation Plan and School-Based budget. The following are attached: Assurances, WSR Implementation Description, WSR Timeline, Participants in Application Development Form, 2001-2002 Activity Plan, Revised Required Programs in Secondary Schools Plan and RPSS required forms (if applicable), Evaluation Plan, Budget Summary, Budget Workpapers, Technology Plan, Accountability Plan and Class Size Reduction Plan.</p>		
Signature of School Principal & Date:		Signature of WSR School Facilitator & Date:
Signature of Chief School Administrator & Date:		Signature of Business Administrator & Date:
<p>The WSR Implementation Plan and School-Based Budget has been duly authorized by the SMT of the _____ School. We have included the copies of the WSR Implementation Plan and School-Based Budget as required.</p>		
Signature of SMT Chair:		SMT Chair Address:
SMT Phone:		SMT Fax:
Due Date: DECEMBER 1, 2000		

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM**

C. IMPLEMENTATION DESCRIPTION

Duplicate this page as needed.

District:		School:
Cohort: ____1 st ____2 nd ____mid-year 2 nd ____3 rd		WSR Model:
# SP. ED. TEACHERS:	# SP. ED. AIDES:	CURRENT # SECURITY GUARDS:
# SELF-CONTAINED SP. ED. CLASSROOMS:	CURRENT # TEACHERS:	CURRENT # ADMINISTRATORS:

Complete this form by repeating each question and succinctly responding to the following questions on the processes used and decisions made in order to complete the 2001-2002 WSR Implementation Plan:

- How was your needs assessment completed and used by the SMT to develop the WSR Implementation Plan?
- What existing programs will be continued and which will no longer be needed based on the requirements of the developer and the components of the WSR model selected?
- What programmatic decisions were made by the SMT to reallocate fiscal and staff resources?
- How will the current plan accomplish full implementation of the WSR model by the third year?
- What revisions, if any, were made to the plan from the previous year?
- What strategies will be used to accomplish increased graduation and attendance rates and decreased dropout rates of students?
- Does the school currently have a full-time health & social services coordinator? ____yes ____no;
a full-time dropout prevention officer? ____yes ____no;
a full-time media technology specialist? ____yes ____no;
a full-time technology coordinator? ____yes ____no?
- Does the school have an on-site health and social services clinic? ____yes ____no?
- Does the school refer to outside health and social service clinics? ____yes ____no?
- What barriers must be overcome to implement your proposed plan effectively?

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM****D. IMPLEMENTATION TIMELINE**

District:	School:
Cohort: ____ 1 st ____ 2 nd ____ mid-year 2 nd ____ 3 rd	WSR Model:

Complete a one- or two-year WSR Implementation Timeline showing all components of the WSR model and leading to full implementation of the model. The timeline should be developed in consultation with the WSR model developer. If a waiver was granted beyond year three, explain the current status of implementation.

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM
E. PARTICIPANTS IN THE SUBMISSION DEVELOPMENT**

District:	School:
Cohort: _____1 st _____2 nd _____mid-year 2 nd _____3 rd	WSR Model:

The following School Management Team members, district staff and other stakeholders participated in the development of the WSR Implementation Plan & Budget :

NAME	TITLE	SIGNATURE

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM****F. CLASS-SIZE REDUCTION PLAN**

District:	School:
Cohort: _____ 1 st _____ 2 nd _____ mid-year 2 nd _____ 3 rd	WSR Model:

Complete this form by responding to the following:

1. Describe your plan for reducing class sizes to the required levels of 1:21 for Grades K-3, 1:23 for Grades 4-8 and 1:24 for Grades 9-12.
2. Indicate class sizes for each grade for 2000-2001 and 2001-2002 and the year that the required levels will be achieved.
3. Indicate any barriers to plan accomplishment and how the school/district will resolve these.
4. How will the district's facility plan affect class-size reduction?

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM****G. RESEARCH-BASED STRATEGIES FOR HIGH SCHOOLS**

District:	School:
Cohort: ____1 st ____2 nd ____mid-yr. 2 nd ____3 rd	WSR Model:

High schools only (grades 9-12): In a narrative, describe how an effective combination of research-based strategies for high schools (listed below) are incorporated into the WSR model or alternative program design based on assessed needs and consideration of the unique characteristics of the school.

1. Create small learning communities so that schools are organized into small units of students and use a variety of instructional strategies that engage students and accommodate individual learning styles;
2. Utilize flexible time for teaching and learning so that schools may organize the day, week and month to lengthen blocks of instructional time;
3. Develop instructional content so that schools are able to structure learning around careers and student interest and link out-of-school experiences to classroom instruction;
4. Develop student assessment so that schools assess student progress by what they are capable of doing and use rich assessments that include portfolios, performance tasks and examples of student accomplishments to measure progress in meeting HSPA and other state assessments;
5. Establish community partnerships so that schools work collaboratively with parents, community and business for the purpose of enabling students to achieve the Core Content Curriculum Standards; and
6. Establish partnerships with institutions of higher education so that the schools establish an articulation agreement with institutions of higher education to implement a WSR model or the whole school alternative program design, use a variety of assessments and evaluations to measure the effectiveness of WSR implementation, and improve the transition between high school and postsecondary education.

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM
H. WAIVER REQUEST FORM**

District: _____	School: _____
Cohort: _____ 1 st _____ 2 nd _____ mid-year 2 nd _____ 3 rd	WSR Model: _____

A one-year equivalency or waiver to the rules must meet the following criteria:

1. The spirit and intent of *N.J.A.C. 6A:24* are served by granting the equivalency or waiver;
2. The provision of a thorough and efficient education to the students in the district and the implementation of the *Abbott* court remedy is not compromised as a result of the equivalency or waiver; and
3. There will be no risk to student health, safety or civil rights by granting the equivalency or waiver.

Summarize waivers requested and the reason for the request on this form. _____

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District:	School:
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model:
WSR Element #1: IMPROVED STUDENT PERFORMANCE/WSR Element #2: RESEARCH-BASED PROGRAM	
Goal Statement:	
Objective:	
Benchmark:	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Element #3: SCHOOL-BASED LEADERSHIP AND DECISION-MAKING	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Element #4: INTEGRATION AND ALIGNMENT OF SCHOOL FUNCTIONS	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-year 2 nd ____ 3 rd	WSR Model: _____
WSR Element #5: EDUCATIONAL TECHNOLOGY (This is also an element of Required Programs in Secondary Schools)	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Page # in SBTP	Budget Description	Budget Detail Amount	Work-paper	Method of Accountability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Element #6: PROFESSIONAL DEVELOPMENT (This is also an element of Required Programs in Secondary Schools)	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Element #7: SAFE SCHOOL ENVIRONMENT CONDUCTIVE TO LEARNING (This is also an element of Required Programs in Secondary Schools)	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Element #8: STUDENT AND FAMILY SERVICES & COORDINATION OF RESOURCES (This is also an element of Required Programs in Secondary Schools)	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Element #9: REWARD SYSTEM	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Component: CLASS SIZE REDUCTION PLAN	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____1 st ____2 nd ____mid-year 2 nd ____3 rd	WSR Model: _____
WSR Component: DROPOUT REDUCTION STRATEGY	
Goal Statement: _____	
Objective: _____	
Baseline Data (98-99)	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

* For purposes of this plan, follow county monitoring requirements to calculate dropout rate.

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____1 st ____2 nd ____mid-yr 2 nd ____3 rd	WSR Model: _____
WSR Component: INCREASING GRADUATION RATE STRATEGY	
Goal Statement: _____	
Objective: _____	
Baseline Data (98-99) Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____1 st ____2 nd ____mid-yr 2 nd ____3 rd	WSR Model: _____
WSR Component: INCREASING STUDENT ATTENDANCE	
Goal Statement: _____	
Objective: _____	
Baseline Data (98-99 Average Daily Attendance) Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Component: SCHOOL-TO-CAREER AND COLLEGE (This is also an element of Required Programs in Secondary Schools)*	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

- List all 3 required components of School-to-Career.

WHOLE SCHOOL REFORM IMPLEMENTATION PLAN
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 st ____ 2 nd ____ mid-yr 2 nd ____ 3 rd	WSR Model: _____
WSR Component: MECHANISM FOR IDENTIFICATION OF STUDENTS REQUIRING REFERRAL TO ALTERNATIVE EDUCATION PLAN (This is also an element of Required Programs in Secondary Schools)	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Secondary Only 2000-2001 Budget Amount	2001-2002 Budget Amount	Work- paper	Method of Accountability
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

**NEW JERSEY DEPARTMENT OF EDUCATION
REQUIRED PROGRAMS IN SECONDARY SCHOOLS PLAN**

J. INVENTORY AND ASSESSMENT FORM

Complete an Inventory and Assessment for each of the RPSS areas listed below. Duplicate this page as needed for each RPSS area. Provide a check for the area completed on each form.

- | | | | |
|---|---|---|--|
| 1 | <input type="checkbox"/> A Mechanism for Access to Health and Social Services | 4 | <input type="checkbox"/> Professional Development |
| 2 | <input type="checkbox"/> School Security Program | 5 | <input type="checkbox"/> School-to-Work or College Transition |
| 3 | <input type="checkbox"/> A Mechanism for Identifying Students Requiring Alternative Education | 6 | <input type="checkbox"/> Technology requirement met by 2000 Survey |

The purpose of this form is to provide a comprehensive list of programs and services that exist in your school for the RPSS area checked above. On the table below, provide the following: (A) a detailed list of the programs and services that exist in the school, district and community that support the checked RPSS area; (B) the name of the provider; (C) the number of students or participants served; and (D) the cost of the program.

	A Program or Service Existing	B Provider School or Community (list name of outside agencies)	C Number of Students Served	D Cost of Program 2000-2001
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

NOTE: Attach a summary of supporting documentation (hard data on impact), not the documentation itself, that confirms the results of the inventory and assessment.

NEW JERSEY DEPARTMENT OF EDUCATION
REQUIRED PROGRAMS IN SECONDARY SCHOOLS PLAN

K. REVIEW OF COMMUNITY RESOURCES FORM

Complete a Review of Community Resources Form for each of the RPSS areas listed below. Duplicate this page as needed for each RPSS area. Provide a check for the area completed on each form.

- | | |
|--|--|
| 1. ____ A Mechanism for Access to Health and Social Services | 4. ____ Professional Development |
| 2. ____ School Security Program | 5. ____ School-to-Work or College Transition |
| 3. ____ A Mechanism for Identifying Students Requiring Alternative Education | 6. ____ Infusion of Educational Technology |

The purpose of this form is to investigate community resources that could possibly be used in the coming year to assist you in providing needed programs and services to students in your school. On the table below, provide the following: (A) a list of programs and services that exist in the community that are not used but COULD be used to support the RPSS area checked above; (B) the name of community agencies that provide the service but are not currently used by the school; (C) the contact and telephone number for the community agency; (D) the reason the outside agency is not currently used; and (E) the total cost of the service or program if provided by the outside agency.

	A Program or Service Existing In Community	B Community Agencies that Provide the Program or Service (not Currently Used)	C Contact Person and Telephone Number	D Reason Outside Agency not Currently Used	E Total Cost of Service or Program by Outside Agency
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					

**NEW JERSEY DEPARTMENT OF EDUCATION
REQUIRED PROGRAMS IN SECONDARY SCHOOLS PLAN**

L. SMT RECOMMENDATIONS

Duplicate this page as needed for each RPSS area. Provide a check for the area completed on each form.

- | | |
|--|---|
| 1. <input type="checkbox"/> A Mechanism for Access to Health and Social Services | 4. <input type="checkbox"/> Professional Development |
| 2. <input type="checkbox"/> School Security Program | 5. <input type="checkbox"/> School-to-Work or College Transition Programs |
| 3. <input type="checkbox"/> A Mechanism for Identifying Students requiring Alternative Education | 6. <input type="checkbox"/> Infusion of Technology |

The purpose of this form is to provide a concise table that represents the SMT review of all programs and services in the checked RPSS area and to recommend if the program or service is needed. After the inventory and assessment are complete, each item identified must be evaluated as to its effectiveness and efficiency. Provide recommendations for elimination or modification of programs or services judged less than efficacious and efficient, or which overlap with the proposed new program or service. An effective program or service is one that produces the expected and desired result. An efficient program or service is one that produces the intended result in a cost-effective way. On the table below, provide the following: (A) a detailed list of programs and services; (B) whether the program or service is new or existing; (C) recommendation to continue or discontinue the program or service based on effectiveness (how well these programs and services are serving the student population); (D) a determination if the program is cost effective; (E) supporting documentation of need for the program or service and evidence of effectiveness (research-based).

	A Program or Service	B New (N) or Existing (E)	C Recommendation to Continue or Discontinue Based on Effectiveness	D Cost Effectiveness of Program or Service	E Supporting Documentation Attached Regarding Effectiveness of Recommended Programs & Need
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

ANY NEW PROGRAM OR SERVICE must be accompanied by a summary of the need for the new programs and an analysis of supporting documentation (data). ANY PROGRAM OR SERVICE THAT IS RECOMMENDED BY THE SMT (EXISTING OR NEW) SHOULD BE TRANSFERRED TO THE ACTIVITY PLAN.

**NEW JERSEY DEPARTMENT OF EDUCATION
WHOLE SCHOOL REFORM
M. EVALUATION FORM**

District: _____	School: _____
Cohort: _____ 1 st _____ 2 nd _____ mid-yr 2 nd _____ 3 rd	WSR Model: _____

Describe the methods that will be used to evaluate (1) implementation progress (formative) and (2) outcomes (summative). Evaluation of implementation progress should determine to what degree the activities described in the plan have been undertaken (are they happening?). Evaluation of outcomes should determine effects on student achievement (is it working?).

Describe what measures will be used, who will develop and conduct the evaluation, when the evaluation will occur, and how results will be used.

FORM I
SCHOOL-TO-CAREER AND COLLEGE INITIATIVES
CHECKLIST AND REVIEW FORM FOR 2001-2002

Adopted Whole School Reform Model:

Number of students in school: **Middle School** _____ **High School** _____

Number of Teachers in School: **Middle School** _____ **High School** _____

RPSS Activity Plan Page #	Perkins Plan Page #	For NJDOE Use Only		Has the SMT included the following School-to-Career (STC) components in its WSR and RPSS plans?
		YES	NO	
				A. Is STC integrated into the WSR model design?
				B. INVENTORY OF PROGRAMS/FUNDING SOURCES
				<ul style="list-style-type: none"> Has the SMT provided a listing of all existing programs, by grade level, under each component of STC: 1) school-based, 2) structured learning experiences, and 3) connecting activities?
				<ul style="list-style-type: none"> Are the Perkins programs offered in the school included?
				<ul style="list-style-type: none"> Are Cross-Content Workplace Readiness Standards reflected?
				C. COLLABORATION OF PERSONNEL /BUDGET/SERVICES
				<ul style="list-style-type: none"> Is a list of the names and titles of all persons involved in the assessment, development and implementation of the school's 2001-2002 STC RPSS plan provided?
				<ul style="list-style-type: none"> teachers
				<ul style="list-style-type: none"> guidance counselors
				<ul style="list-style-type: none"> administrators
				<ul style="list-style-type: none"> fiscal staff
				<ul style="list-style-type: none"> parents
				<ul style="list-style-type: none"> employers
				<ul style="list-style-type: none"> community leaders/community-based organizations
				<ul style="list-style-type: none"> Are all funding sources to be utilized listed?
				<ul style="list-style-type: none"> School to Career (STC)
				<ul style="list-style-type: none"> Perkins
				<ul style="list-style-type: none"> Other sources
				<ul style="list-style-type: none"> Is collaboration with existing STC and Perkins personnel reflected in the plan?
				D. IMPLEMENTATION STRATEGIES/ACTIVITIES: SCHOOL-BASED LEARNING
				<ul style="list-style-type: none"> Is a comprehensive career guidance and counseling program included for all students?
				<ul style="list-style-type: none"> Does instruction integrate academic and occupational concepts?
				<ul style="list-style-type: none"> Are students counseled and enrolled in courses in one or more clustered disciplines?
				<ul style="list-style-type: none"> Are career awareness and exploration activities provided for all students?
				<ul style="list-style-type: none"> Are strategies being implemented for secondary and postsecondary articulation (i.e. Tech Prep programs)?

RPSS Activity Plan Page #	Perkins Plan Page #	For NJDOE Use Only YES NO		Has the SMT included the following School-to-Career (STC) components in its WSR and RPSS plans?
				<ul style="list-style-type: none"> • Are professional development activities provided for staff related to Cross-Content Workplace Readiness Standards? • Is staff allowed to attend professional development activities outside of the district?
				E. IMPLEMENTATION STRATEGIES/ACTIVITIES: STRUCTURED LEARNING EXPERIENCE <ul style="list-style-type: none"> • Has the district board of education designed structured learning experiences as rigorous activities that integrate curriculum and are linked to Core Curriculum Content Standards? An example might be project-based learning activities.
				<ul style="list-style-type: none"> • Are opportunities for students provided that allow for a variety of employment positions/activities within an industry?
				<ul style="list-style-type: none"> • Are comprehensive guidance, mentoring and placement services provided?
				<ul style="list-style-type: none"> • Does the school provide a means for students to participate in a series of paid or unpaid experiences, i.e. volunteerism, community service, cooperative education, school-based enterprises, and/or internships if requested by students?
				F. IMPLEMENTATION STRATEGIES/ACTIVITIES: CONNECTING ACTIVITIES <ul style="list-style-type: none"> • Does the instruction provide for activities that match students to structured learning experiences: visits to job sites, industry speakers, mentoring, and/or job shadowing?
				<ul style="list-style-type: none"> • Are there comprehensive career guidance and placement services available for students?
				<ul style="list-style-type: none"> • Is technical assistance provided for all stakeholders?
				G. EVALUATION PLAN <ul style="list-style-type: none"> • Is there a plan to complete a formative and summative evaluation of all program components?
				<ul style="list-style-type: none"> • Is there a plan and evidence of implementation of participating student follow-up to determine post-program outcomes on student placements and activities?

WSR IMPLEMENTATION PLAN – SMT REVIEW

This form should be used by the SMT to ensure that the plan and budget submitted to the Department of Education (DOE) are complete and comprehensive. SUBMIT THIS FORM WITH THE PLAN. Incomplete plans and/or budgets may delay approval by the DOE.

	WSR PLAN COMPONENT	QUESTION	YES/NO
1.	Title Page	Are all sections completed correctly?	
2.	Assurances & Approval	a. Have the CSA, principal and SMT chair provided assurances for the plan?	
		b. Have comments of the board and CSA (if any) and the school's responses been attached?	
		c. Are the assurances understood and signed by appropriate individuals?	
3.	WSR Description	Is the description of the following adequate and does it contain all necessary components?	
		a. A summary of the needs assessment?	
		b. A summary of the inventory of programs and services?	
		c. Is there a description of existing programs that will be continued?	
		d. Is there a description of programs no longer needed based on the requirements of the developer and the components of the WSR model selected?	
		e. Is there a description of how the SMT's programmatic decisions were used to reallocate fiscal and staff resources?	
		f. Is it clear how the plan accomplishes full implementation by the 3 rd year?	
		g. Have any revisions made to the plan from the previous year been explained?	
		h. Is there a summary of strategies for class-size reduction for elementary and secondary schools?	
		i. Are there strategies for increased graduation rates for secondary schools?	
		j. Are there strategies for improved attendance rates for secondary schools?	
		k. Are there strategies for decreased dropout rates in secondary schools?	
		l. Is there a summary of the goals, objectives, outcomes, waivers (if applicable) and particularized needs (if applicable)?	
4.	WSR Timeline	Has a timeline been included that shows full implementation of all WSR model components by the 3 rd year?	
5.	Participants in Plan Development	Were the following individuals or groups involved in the plan development to the fullest extent?	
		a. SMT chair?	

	WSR PLAN COMPONENT	QUESTION	YES/NO
		b. School staff?	
		c. Parents?	
		d. Community members?	
		e. District WSR liaison?	
		f. District technology coordinator?	
		g. District bilingual/ESL specialist?	
		h. District school-to-career specialist?	
		i. District special education specialist?	
		j. District early childhood specialist?	
		k. District Title I office?	
		l. District business administrator?	
		m. Other stakeholders?	
6.	Instructions	a. Was the plan developed in accordance with the WSR Implementation Plan Instructions?	
		b. Was the plan developed in accordance with the developer's requirements?	
7.	ACTIVITY PLAN	Does the plan include the following:	
	Goals	a. Appropriate goals?	
	Objectives	b. Measurable objectives?	
		c. Objectives for all areas in which the school has not met state student performance standards?	
	Activities	d. Adequate activities to achieve objectives?	
		e. Adequate timelines to accomplish activities?	
		f. Budget data that corresponds to expenditures on the School-based Budget workpapers?	
		g. An evaluation plan for accomplishment of each activity and objective? and Is the plan consistent with the elements of WSR?	
		h. Improved student performance?	
		i. Research-based program?(integrated into other elements)	
		j. School-based leadership and decision-making?	
		k. Integration and alignment of school functions?	
		l. Educational technology?	
		m. Professional development?	
		n. Safe school environment conducive to learning?	
		o. Student and family services/coordination of resources?	
		p. Reward system?	
8.	Articulation	Do the activities ensure that curriculum is aligned with the CCCS and is articulated among the grades in the school?	
9.	High school transition	If applicable, do the activities indicate collaboration with the middle or high school that students will attend to ensure a smooth transition to the next grade level?	
10.	Early Childhood transition	If applicable, do the activities indicate collaboration with the early childhood education program that students will attend to ensure a smooth transition between levels?	
11.	Other Plans	Have the following other plans been included and are	

	WSR PLAN COMPONENT	QUESTION	YES/NO
		the plans effective and adequate?	
		a. Technology Plan?	
		b. Designation of a full-time technology coordinator?	
		c. Class Size Reduction Plan?	
12.	Secondary	Have the following required RPSS forms been included?	
		a. Inventory and Assessment?	
		b. Community Resources?	
		c. SMT Recommendations?	
		Are the following Required Programs in Secondary Schools Plan areas and other required areas adequately and efficiently addressed?	
		Improved Attendance?	
		Increased Graduation Rates?	
		Reduced Dropout Rates?	
		Class Size Reduction Plan?	
		Referral to Health and Social Services?	
		Continuous Professional Development?	
		Integration of Technology?	
		A Mechanism for Identifying Students in need of Alternative Education?	
		School-to-Work or College?	
		Security Plan?	
		Provided for a full time Health and Social Services Coordinator?	
		Provided for a Full Time Dropout Prevention officer?	
		Provided for a full time Technology Coordinator?	
		High schools only: Does the plan include an effective combination of research-based strategies for high schools?	
13.	Evaluation	Are the methods used to evaluate the following adequate?	
		Implementation progress?	
		Outcomes?	
		Does the evaluation plan address the following?	
		Student achievement?	
		Student attendance?	
		Grade promotion?	
		Graduation?	
		Suspension?	
		Expulsion rates?	
		Dropout rates?	
		Stakeholder support?	
		Parental participation?	
		Technology integration?	
		Rewards?	
		Continuous staff development?	
		Access to health and social services?	
		Placements in alternative education?	
		Placements through School-to-Work or College?	

	WSR PLAN COMPONENT	QUESTION	YES/NO
		Class size?	
		High schools only: Combination of research-based strategies for high schools incorporated in the school?	
14.	Budget	Does the budget integrate all local agency resources in a cost-effective manner?	
		Has the following information been completed correctly?	
		School type?	
		Current school enrollment?	
		Projected school enrollment?	
		Name of the WSR model?	
15.	General	Has the following information been completed correctly on the summary and workpapers?	
		Funding sources?	
		FTEs?	
		Salaries?	
		Benefits?	
		All workpapers?	
		Transfer of costs from Activity Plan to workpapers?	
		Transfer of costs from workpapers to Budget Summary?	
		Are the funding sources listed permitted by federal or state guidelines to be used for WSR?	
		Where ECPA funds are included as a funding source, is their use consistent with the approved ECP plan?	
		Is the method for estimating salary and benefits clearly explained?	

**ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)
IMPLEMENTATION STRATEGIES/ACTIVITY/ BUDGET TABLES
SCHOOL YEAR 2001-2002**

District Name: _____ **School Name:** _____

Goal: _____

Objective: _____

The ACTIVITIES listed **must include:** professional development; specific examples of infusion of technology into the adopted WSR model and the curriculum; and acquisition and maintenance of hardware, software and all related technology items such as wiring, network access, maintenance, telecommunications fees, and facilities. **NOTE:** Each item in the budget detail must also appear in the corresponding workpaper.

Strategy/Activity	CCCS related to Strategy/Activity	title of person(s) that will implement strategy or activity	Budget detail and funding source (see KEY)	Work-paper	Timeline 2000-2001 or 2001-2002

FUNDING SOURCE KEY:

School Funding = S
District Funding = D
Grant Funding = G
Other Funding = O, please specify in table

ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)

BUDGET SUMMARY

SCHOOL YEARS 2000 - 2002

District Name _____ **School Name** _____

List all expenditures from the **Implementation Strategies/Activity/ Budget Tables** including budget details, total allocation, funding source (e.g., District, State, etc.) and workpaper reference letter

BUDGET ITEM & table page #	Detail or Cost Breakout	Total Allocation	Funding Source (see key in table)	Workpaper Reference

Revision Date _____ Page ____ of ____

**ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)
EVALUATION PLAN
SCHOOL YEAR 2001-2002**

District Name: _____ **School Name:** _____

GOAL: _____

OBJECTIVE (Refer to the ASBTP implementation strategies/activity/budget table)	Tools or criteria used to determine the success of the objective	Person(s) that will evaluate the objective	Timeline for Evaluation (Indicate month and year)

**ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)
CHECKLIST AND REVIEW FORM FOR 2001-2002**

County: _____ District: _____
School Name: _____

Adopted Whole School Reform model: _____

School grade level: _____ Number of students in school: _____ Number of teachers in school: _____
School and/or district website address: _____

Page # in ASBTP	Page # in DTP	For NJDOE Use ONLY		LINK ALL OF THE FOLLOWING SCHOOL-BASED TECHNOLOGY PLAN (ASBTP) COMPONENTS TO THE DISTRICT TECHNOLOGY PLAN (DTP)
		NO	YES	
				VISION <ul style="list-style-type: none"> What is the vision for technology in your school over the next two years? List the titles of all persons involved in the development of the school's 2001-2002 technology plan.
				GOALS AND OBJECTIVES (through 2002) <ul style="list-style-type: none"> What are the school's goals and objectives? Be sure to link them to the district technology plan's goals and objectives. Describe how the adopted model is incorporated into your school's goals and objectives for technology.
				SURVEY <ul style="list-style-type: none"> Attach a copy of the completed school survey form from NJDOE's 2000 School Technology Survey.
				IMPLEMENTATION STRATEGIES/ACTIVITY NARRATIVE <ul style="list-style-type: none"> Describe how the school is acquiring and maintaining all equipment, including wiring for buildings and networking items. Describe the professional development activities for teachers, administrators, and school library media personnel for 2001-2002.
				IMPLEMENTATION STRATEGIES/ACTIVITY/BUDGET TABLES Complete the ASBTP implementation strategies/activity/budget tables to describe the implementation strategies and educational technology school-based activities/ link with the CCCS/ responsible party/timeline/ and costs for 2001-2002 school year.
	N/A			BUDGET SUMMARY PAGE List all expenditures from activity tables and indicate amounts, including budget details, total allocation, funding source and workpaper reference.
				EVALUATION PLAN Complete the ASBTP Evaluation Plan to describe how the evaluation of the goals and objectives for technology in your school will be accomplished.

Reviewed by:

Signature of SMT Representative

Date: _____ E-mail: _____

Signature of School Principal

Date: _____ E-mail: _____

Signature of District Technology Director/Coordinator

Date: _____ E-mail: _____

The person to contact for questions about the school technology plan: (PLEASE PRINT)

Name: _____ Title: _____

Phone number: _____ E-mail address: _____

APPLICATION

**LOCAL PARTICULARIZED NEED FOR
SUPPLEMENTAL PROGRAM OR SERVICE**

INSTRUCTIONS AND FORMS

**David C. Hespe
Commissioner of Education**

**Barbara Anderson
Assistant Commissioner
Division of Student Services**

**Thomas McMahon
Assistant Commissioner
Division of Finance**

**Submission Due Date:
December 1, 2000**

**To be submitted with
Whole School Reform Implementation Plan
Required Programs in Secondary Schools Plan**

**NEW JERSEY DEPARTMENT OF EDUCATION
PO Box 500
Trenton, NJ 08625-0500**

INTRODUCTION

A. LOCAL PARTICULARIZED NEED

A local particularized need is one characterized by the following:

- is supported by an assessment of needs of a specified population of students in a given school or for early childhood programs in the district;
- has been demonstrated to be the cause of student failure in achieving the Core Curriculum Content Standards;
- can be remedied or corrected by a program or service, which has been formally evaluated to demonstrate its effectiveness; and
- is not effectively addressed by a WSR model or a whole school alternative program design, nor by the required secondary programs.

- A particularized need is school-based.
 - Supplemental funding is district-based.

Subsequent to the completion of the WSR implementation plan or the Required Programs in Secondary Schools plan, the School Management Team (SMT) may consider whether there exists a particularized need for further supplemental educational programs or services which are essential to ensure students' educational success and without which students cannot achieve the Core Curriculum Content Standards (CCCS). If such a need is determined, the SMT is responsible for providing a recommendation to the local board of education.

Administrative Code provides that, upon determination by the school board that a school has demonstrated a particularized need for an essential program or service, the school board must submit to the Department of Education (DOE) a proposed programmatic plan to address the particularized need. The purpose of this plan is to determine the required elements. The board's request for reallocation or additional funds to support a particularized need will be reviewed by the DOE in the context of the district budget review process.

NO PROGRAMS OR SERVICES BEYOND THOSE REQUIRED BY THE WSR MODEL OR APPROVED DESIGN SHALL BE APPROVED UNLESS A PARTICULARIZED NEED IS DEMONSTRATED PURSUANT TO N.J.A.C. 6A:24A-5.1.

STATE REGULATIONS SUMMARY

The applicable sections of Chapter 6A:24 for a local particularized need include:

- 1.2 – Definitions
- 2.3 - Training of School Management Team Members
- 3.4 - Early Childhood Program Operational Plan
- 4.2 - Whole School Alternative Program Design
- 4.3 - Submission of WSR Implementation Plan
- 4.4 - School-Based Budgets
- 5.1 - Demonstration of Particularized Need
- 5.2 - Application for Supplemental Programs or Services
- 6.1 - Implementation of Required Programs in Secondary Schools
- 7.1 - Application for Additional State Aid
- 8.1 - Long Range Facilities Plan

B. APPLICATION FOR LOCAL PARTICULARIZED REVIEW

The New Jersey Department of Education (NJDOE) will review submissions to ensure the following:

- required sections are complete and accurate;
- particularized needs described are supported by an assessment of student needs;
- particularized needs described have been shown to be the cause of student failure in achieving the CCCS;
- programs or services proposed as the remedy are documented by evidence showing they have worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need and are not provided by the WSR model or Required Programs in Secondary Schools;
- expenditures support the programs described and are not provided within the illustrative budget or Required Programs in Secondary Schools;
- the submission is complete, including signatures, assurances; and
- SMTs and LEAs are notified of final approvals.

Incomplete submissions may delay approval of the application or lead to disapproval. Once a Local Particularized Need Plan is approved it must be incorporated into the district budget using Fund 15.

C. PLAN APPROVAL PROCESS

Plans will be reviewed by the department to ensure that schools have followed the code requirements. All plans must:

- have all cover page information and signatures;
- be based on a comprehensive needs assessment. Careful consideration must be given to providing a plan that is based on the documented needs of the identified student population; and
- have attached all required justifications, descriptions, and supporting documentation.

The department will review all plans during the budget process and will contact the district and

school to discuss the status of their plans.

The following are the steps in the approval process of local particularized needs:

Step 1. Needs Assessment indicates a Particularized Need should be submitted.

Step 2. SMT consults with principal and CSA to consider if a demonstrated particularized need exist.

Step 3. Determination of Particularized Need by SMT should include:

- A. Assessment of student achievement of CCCS
- B. Where the CCCS are not being met a determination that failure of those students is caused by a particularized needs which are not capable of being addressed by existing WSR or required secondary programs at the school level;
- C. An inventory of currently used programs and services targeted to the area(s) of need, together with an assessment of their effectiveness and efficiency in meeting such need, and an explanation as to why they are insufficient to meet the identified needs; and
- D. Review of community resources which could be used to address the identified areas of need and an explanation as to how they are being used or why they are not being used.

Step 4. SMT recommends to the board, with a copy to the SRI, the appropriate supplemental programs and services, which shall be documented by evidence that the programs and services have worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need.

Step 5. The board responds to SMT in writing:

- A. In those instances where a board does not agree that the SMT has demonstrated a particularized need, the board shall provide to the SMT a detailed statement of the reasons for its determination.
- B. In those instances where the board determines that a particularized need for a recommended supplemental program or service has been demonstrated, the board shall submit its proposed plan for the program to the department for approval in accordance with provisions of N.J.A.C. 6A:24-7.1.
- C. In those instances where a board determines that resources are insufficient to support the supplemental programs or services approved pursuant to N.J.A.C. 6A:24-5.2 after all possible reallocation at the school and district levels have been made, the board shall apply to the department for additional state aid in accordance with the requirements of N.J.A.C. 6A:24-7.1.

Step 6. The board submits its proposed plan for the program or service to the department for approval. Applications for such approval shall be submitted on forms provided by the department and shall at a minimum include:

- A. The particularized needs forms.
- B. A demonstration that one or more public hearings have been held in order to obtain parent, student, teaching staff and citizen input on the application
- C. A general description of the supplemental program(s) or service(s) and an explanation of the particularized need(s) which shall be met in order to enable those students to achieve the Core Curriculum Content Standards;
- D. A demonstration that the supplemental program(s) or service(s) is documented by evidence that the program(s) or service(s) have worked successfully in the school and/or in other schools with similar characteristics and is proven to address the identified need(s)
- E. A plan for evaluating the continuing effectiveness and efficiency of the supplemental program(s) or service(s);
- F. A demonstration that the requested supplemental programs or services will not delay

or impede implementation of, and does not duplicate, WSR or secondary programs and services required;

- G. A recommendation of elimination or modification of existing programs or services identified as less than effective and efficient, or which would overlap with proposed new program or service; and
- H. An operating budget for the purpose of the supplemental program(s) or service(s).

Step 7. Supplemental programs or services that are not approved by the department pursuant to N.J.A.C.6A:24-5.2 cannot be included in a district wide budget that requests additional state aid pursuant to N.J.A.C.6A:24-7.1.

- A. Any application for supplemental programs or services denied by the Department may be appealed to the Commissioner pursuant to the provisions of N.J.A.C. 6A:24-9.1.

INSTRUCTIONS

The board must submit a separate application for each discrete or unrelated particularized need for a supplemental program or service. Separate applications are required for each school within a district even though two or more schools may have demonstrated very similar particularized needs. A signed board resolution must be submitted with the application. At a minimum, the programmatic plan for a particularized need should include:

1. Cover Page- Form Provided

Insert the date of the signed board resolution in the space provided.

2. Definition of Identified Particularized Need

3. Program Description

Provide the following in the Program Description:

- a description and explanation of the particularized need that the programs or services proposed as the remedy will address to enable the identified students to achieve the CCCS;
- a description of how the requested supplemental program will not delay or impede implementation of, or does not duplicate, WSR programs, Required Programs in Secondary Schools, or other services required elsewhere in the regulations;
- a description of the district's plan for incorporating the program or service into subsequent regular budgeting cycles.
- inventory and assessment of all such existing programs that have not been already included in the WSR Implementation Plan or Required Programs in Secondary Schools;

4. Description of Methods and Results

Describe the methods and results of the student needs assessment underlying the request, including an identification of the specific population(s) to be served.

5. Justification

Provide a justification that shows that the needs to be addressed cannot be met through existing WSR or Required Programs in Secondary Schools. This justification should include the following:

- Supporting documentation that confirms the results of the inventory and assessment;
- Explanation for why each existing WSR or RPSS program is insufficient to meet the identified need.

- If the application is for on-site health and social services, an explanation as to why the program cannot be provided efficiently or effectively off site.

6. Detailed Activity Plan – Form Provided

On each Activity Plan form, state the name of the district, school, WSR model or Required Program in Secondary Schools area, current date and page number. The revision date will be used if revisions are necessary. Indicate cohort or Non-WSR secondary school on each form. Complete the following for each page of the Activity Plan:

- create a goal, objective and benchmark relating to accomplishment of the particularized need;
- describe the tasks and activities in chronological order planned for the accomplishment of each goal and objective in the Activity column;
- indicate the month and year the activity will be completed in the Timeline column;
- list, in detail, all expenditures necessary to complete the activity in the Budget Description column;
- include the cost of each detailed expenditure in the Budget Amount column;
- indicate the GAAP code and Workpaper from the school based budget form which coincides with the expenditures and costs for this activity; and
- indicate in the Evaluation column the anticipated result/outcome & specific data that will track the impact of each program or service.

7. Budget – Form Provided

A detailed plan and budget for the proposed program or service, including staffing, supplies, facilities and other considerations, as well as a demonstration, where appropriate, of compliance with applicable law. A separate budget form (attached) must be submitted for each particularized need submitted by a school.

An identified particularized need may be funded with current resources, the reallocation of existing resources and/or a request for additional supplemental funds. Current existing resources may include allowable federal, state, and local resources including funds for one-time expenditures in the 2000-2001 budget that will not be continuing in the 2001-2002 (e.g., major renovations, computer purchases, rewiring). The request for supplemental funds for an identified need must address all possible funding sources. If the identified need cannot be addressed with current resources, a district may request supplemental funding.

Complete a budget statement for the identified particularized need. In the spaces provided, include a breakdown of all existing resources that will be

allocated for the particularized need by funding source and the amount that is being reallocated. If additional funds are being requested, indicate the estimated amount. The total for all identified resources should agree with the total amount for the particularized need. The amounts provided are estimates. Actual requests for supplemental funding will be made through a separate application process that will be part of the February budget submission. Those districts making supplemental funding requests will be asked to identify other programs, services and expenditures that would have to be eliminated if supplemental funding is not provided. **Once approved, appropriations for particularized needs cannot be eliminated.**

FORMS

A. SUBMISSION CHECKLIST FOR THE APPLICATION FOR LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE
--

Use this checklist to ensure that the contents of your Particularized Needs submission package are complete.

- _____ Cover Page (Form Provided)
- _____ Definition of Identified Particularized Need
- _____ Program Description
- _____ Description of Methods and Results of Student Needs Assessment
- _____ Justification Showing that WSR Model or Required Secondary Program Does Not Address Student Need
- _____ Inventory and Assessment of All Existing Programs
- _____ Supporting Inventory and Assessment of all Existing Programs Documentation
- _____ Explanation for Why Each Existing Program Does Not Meet Particularized Student Need
- _____ Health and Social Service Request--Explanation Why the Program Cannot Be Provided Effectively Off Site
- _____ Detailed Activity Plan (Form Provided)
- _____ Budget (Form Provided)

**NEW JERSEY DEPARTMENT OF EDUCATION
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE
B. COVER PAGE**

SCHOOL:		NAME OF PROPOSED PARTICULARIZED NEED PROGRAM:	
DISTRICT:		POPULATION SERVED:	
COHORT: ____1 st ____2 nd ____mid-yr. 2 nd ____3 rd	WSR MODEL:	SECONDARY SCHOOL: ____ MIDDLE ____ HIGH GRADES SERVED: ____ TO ____	
CURRENT DATE:		REGION: ____ North ____ Central ____ South	
DISTRICT CONTACT:		GRADE SPAN OF SCHOOL:	
DISTRICT CONTACT PHONE:		SCHOOL PRINCIPAL:	
DISTRICT CONTACT FAX:		PRINCIPAL PHONE:	
DISTRICT CONTACT E-MAIL:		PRINCIPAL FAX:	
SCHOOL ADDRESS:		PRINCIPAL E-MAIL:	
DISTRICT BUSINESS ADMINISTRATOR NAME:		STATE, ZIP	
DISTRICT ADDRESS—CITY, STATE, ZIP		DISTRICT BUSINESS ADMINISTRATOR PHONE/FAX:	
		TOTAL FUNDS REQUESTED:	
CERTIFICATION			
To the best of my knowledge and belief, the information contained in the Local Particularized Need for Supplemental Program/Service Application is true and correct.			
Certification of School Principal:			
Certification of WSR School Facilitator:			
Certification of Chief School Administrator:			
Certification of Board of Education:			
The Local Particularized Need Application has been duly authorized by the SMT of the _____ School. We have included the copies specified in the instructions			
Certification of SMT Chair:			
SMT Chair Address:		SMT Chair Phone:	
Local Particularized Needs Applications must be included with the WSR Implementation Plan or RPSS Plan and received by:			
December 1			

ACTIVITY PLAN
FOR LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE

Duplicate as required.

District:			School:			
Cohort: _____ 1 st _____ 2 nd _____ mid-yr. 2 nd _____ 3 rd		WSR Model:		Non-WSR Secondary School		
Name of Proposed Particularized Need Program or Service:						
Goal Statement:						
Objective:						
Population:						
#	Activity	Timeline	Budget Description	Budget Amount	GAAP Code & Workpaper	Evaluation Results
1						
2						
3						
4						
5						
6						
7						
8						
9						

NEW JERSEY DEPARTMENT OF EDUCATION
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE
BUDGET SUMMARY
NAME OF PROPOSED PROGRAM OR SERVICE TO MEET PARTICULARIZED
NEED:

District	School	County	District Code	School Code

EXPENDITURE CATEGORY	FUNCTION / OBJECT CODES	FUNDING SOURCE	2000-2001 BUDGET	EXISTING FUNDS ALLOCATED	FUNDS REALLO-CATED	ADDITIONAL FUNDS REQUESTED
INSTRUCTION	100-					
Salaries of Teachers	100-101					
Other Salaries for Instruction	100-106					
Purchased Prof. & Tech. Serv.	100-300					
Other Pur. Serv. (400-500)	100-500					
Tuition	100-560					
General Supplies	100-610					
Textbooks	100-640					
Other Objects	100-800					
SUBTOTAL INSTRUCTION						
SUPPORT SERVICES	200-					
Sal. Of Supervisors of Instr.	200-102					
Sal. of Program Directors	200-103					
Sal. of Other Prof. Staff	200-104					
Sal. of Secr. & Clerical Assist.	200-105					
Other Salaries	200-110					
Personal Serv. -Benefits	200-200					
Purchased Prof. - Ed. Services	200-320					
Other Purchased Prof. Services	200-330					
Purchased Technical Services	200-340					
Rentals	200-440					
Contr. Servs - Transport. Other Than Betw. Home & School	200-516					
Travel	200-580					
Other Pur. Serv. (400-500)	200-590					
Supplies and Materials	200-600					
Other Objects	200-890					
SUBTOTAL - SUP. SERV.						
FACILITIES ACQ & CONSTR SERV	400-					
Buildings (Use Charge)	400-720					
Instructional Equipment	400-731					
Non Instructional Equipment	400-732					
SUBTOTAL - FAC ACQ 7 CONSTR						
TOTAL						
	Funding Source	Estimate				
Resources (Attach a sheet if additional space is needed)						
Existing Resources						
Existing Resources						
Reallocations						
Supplemental Funding Request						
TOTAL						

SMT REVIEW FORM

LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE

This form should be used by the SMT to ensure that the plan and budget submitted to the Department of Education (DOE) are complete and comprehensive. DO NOT SUBMIT THIS FORM WITH THE PLAN. Incomplete plans and/or budgets may delay approval or lead to disapproval by the DOE.

	PART. NEED PLAN COMPONENT	QUESTION	YES/NO
1	Cover Page	Are all sections completed correctly?	
2	Board Resolution	Is a Board of Education resolution approving submission of the plan enclosed?	
3	Definition	a. Has a clear and complete definition of the proposed particularized need been included?	
		b. Is adequate documentation provided to establish that the proposed program or service is documented by evidence showing it has worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need with effective results?	
4	Program Description	Is the description adequate and does it contain the following necessary components:	
		a. Explanation of the particularized need, that the program or service will address to enable the identified students to achieve the CCCS?	
		b. Description of how the requested program will not delay or impede implementation of, nor duplicate, WSR program, RPSS or other services required in the regulations?	
		c. Description of district's plan for incorporating the program or service into subsequent regular budgeting cycles?	
5	Justification	Does the justification for the particularized need adequately show that the needs cannot be met through existing WSR or RPSS and include the following:	
		a. An inventory and assessment of all such existing programs that have not been already included in the WSR Implementation Plan or RPSS?	
		b. Supporting documentation that confirms the results of the inventory and assessment (hard data)?	
		c. Explanation for each existing program or service as to why it is insufficient to meet the identified need?	
		d. If the application is for health and social services on site, an explanation as to why the program cannot be provided efficiently and effectively off site?	
6	Activity Plan	Does the plan include the following?	
	Goals	a. Appropriate goals?	
	Objectives	b. Measurable objectives?	

	PART. NEED PLAN COMPONENT	QUESTION	YES/NO
	Activities	c. Adequate activities to achieve objectives?	
		d. Adequate timelines to accomplish activities?	
		e. Budget data that corresponds to expenditures on the budget sheet?	
		f. An evaluation measure for accomplishment of each activity and objective?	
	Evaluation	Are the methods used to evaluate progress and outcomes of goals and objectives adequate?	
		Are methods used to evaluate student outcomes adequate?	
7	Budget	Has the following information been completed correctly on the budget page?	
		a. Funding source?	
		b. 2001-2002 Budget	
		c. Existing funds allocated?	
		d. Funds reallocated?	
		e. Additional funds requested?	
		f. How cost effective is the budget?	
		g. Are all needed supplies and staff included in the budget?	